

for every child

Libya Storm Daniel & Flooding

Situation Report #4 5 October 2023



Main Figures



To be reached with **Emergency Medical supplies** prepositions with NCDC



through mobile teams



Number of schools identified for reopening with UNICEF support

Ĥ 17

Number of health

facilities supported



¶‰ 7,655 ppl

67

Reached with Hygiene kits

of relief supplies

Received



10,500

Children targeted by **NCDC** with Measles campaign supported by UNICEF



Frontline workers received capacity building to provide

> Number of people reached with social and behavioral change awareness through direct interaction



91,750 ppl

Covered with essential medical supplies for 3 months



333 Child,

Micronutrients supplements distributed



49,000

्रिक 3,600

Children provided with

early development

and recreational kits

Water Purification tablets distributed

Children, adolescents, and caregivers supported with community-based mental health and psychosocial support

612



8,000 Children

Covered with 200 school in box kits distributed to MoE



and 1,100 Women

Highlights

- UNICEF supported 14 primary health care facilities and 3 secondary health facilities with essential health supplies sufficient to meet the essential health needs of 91,750 people for three months, with a specific focus on maternal and child health services.
- Over 530 children and 81 parents have been reached with psychosocial support, and 62 partners' staff have been trained in psychosocial first aid.
- Since the beginning of the crisis, UNICEF has distributed water treatment materials to authorities able to cover 250,000 people and delivered 7,655 individual hygiene kits.
- UNICEF launched in collaboration with the National Center for Disease Control (NCDC) the "Safe Water: Healthy Lives" awareness campaign, targeting the most affected locations in eastern Libya, and focusing on preventive measures against waterborne diseases, promoting safe hygiene practices, and prioritising the safety and well-being of unaccompanied children. Nearly 12,000 people have been reached with crucial messages.
- UNICEF trained 13 technicians from storm-affected areas on water quality testing to ensure water quality and mitigate waterborne health risks.
- UNICEF initiated a rapid mapping of flood-affected schools. Fourteen schools have been identified for immediate cleaning and reopening, and UNICEF is supporting 6,400 children to return to learning as soon as possible.

Situation Overview

The humanitarian catastrophe triggered by Storm Daniel in northeastern Libya on 10 September continues to impact the affected population significantly. As of 4 October, the Office for the Coordination of Humanitarian Affairs (OCHA) confirms a death toll of 4,333 individuals and 8,540 people missing¹.

The displacement crisis triggered by the storm and flooding has reached a critical point. The International Organization for Migration (IOM) has reported 42,054² displaced individuals, with 96 per cent of these concentrated in eastern municipalities, accounting for 96 per cent of those affected. Displaced populations face harsh challenges in finding shelter and lifesaving support, with many now relying on and living temporarily with relatives. As of 4 October, OCHA reported 26 sites, hosting nearly 2,600 IDPs, being used as temporary shelters. A time of reporting information from the ground indicates that authorities started planning to move IDPs from temporary shelters into other alternative accommodations, especially attempting to free up schools in preparation for their reopening. The destructive impact of Storm Daniel is further evident in the extensive damage to infrastructure. A total of 30,805³ houses and buildings have been affected, leaving communities grappling with losing their homes and vital resources.

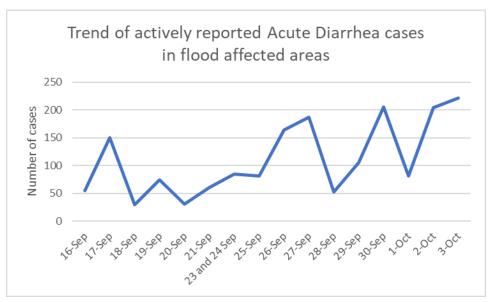
Health and Nutrition: Storm Daniel strained eastern Libya's health system, hitting primary healthcare centres (PHCs) and vaccination units, notably in major cities like Derna. According to field assessments by the UNICEF team, over half of the health facilities in affected areas have partially or entirely ceased operations. Vital facilities, such as Taknis Vaccination Center, Almkhaili Rural Hospital, and Albayada Rural Hospital, all key vaccination hubs, were critically damaged. This disruption to the health system heightens the risk of waterborne and vaccine-preventable diseases, especially among children. Displaced families and children now living in unfavourable conditions are at risk of other health problems, including skin and respiratory infections.

 $^{^1\} https://relief web.int/report/libya/libya-flood-response-humanitarian-update-3-october-2023$

² https://dtm.iom.int/reports/libya-storm-daniel-flash-update-7-30-september-2023

³ https://erccportal.jrc.ec.europa.eu/ECHO-Products/Maps#/maps/4648

WHO reports 101 health worker fatalities, affecting healthcare accessibility for vulnerable populations, including children. Sixty-three per cent of assessed hospitals are partially non-functional⁴. There is growing concern about a public health emergency, with the National Center for Disease Control (NCDC) reporting 1,905 Acute Watery Diarrhoea⁵ (AWD) cases as of 3 October across affected towns. This represents 71 per cent of all Early Warning Alert and Response Network (EWARN) reported cases, emphasising the need for preparedness, active monitoring, surveillance and promoting personal hygiene measures. So far, however, AWD has not resulted in waterborne disease outbreaks, as prevalence trends are comparable to pre-crisis rates.



1 Epidemiological trend for diarrhoea cases at eastern Libya-flooded affected locations from 16. Sept to 3. Oct.23

WASH: Eastern Libya's water and sanitation infrastructure suffered severe storm and flooding damage, leading to acute water shortages and environmental/public health concerns. Flooding has increased groundwater contamination risks and poses a significant threat of waterborne disease. Al-Marg and Sousse experienced sewage flooding and blockages, while AlBayda's sewage treatment plant was inundated with flood waters that caused equipment/facility damage. WASH facilities in public buildings like schools require rehabilitation and improvement. The General Company of Water and Wastewater (GCWW) has started maintenance work on non-operational boreholes and the sanitation network. The already fragile pre-storm WASH systems, now compounded by Derna's non-operational desalination plant, require immediate, coordinated restoration efforts, including strengthening the region's water and sanitation maintenance capacity, focusing on safeguarding children's health and safety.

Child Protection: The Multi-Thematic Rapid Needs Assessment (MTRNA) highlights significant mental health challenges amongst the affected population, with 56 per cent of surveyed children experiencing psychosocial distress. Symptoms include unusual crying, sadness, nightmares, and bedwetting. Adults also exhibit high psychological trauma and stress levels, with signs like excessive worrying, nightmares, insomnia, and recalling past traumatic experiences, especially among displaced families.

The storm's impact goes beyond physical damage, with children facing protection risks such as isolation and potential exploitation. There are unreported incidents of unaccompanied and separated children (UASC), with many

⁴ WHO Libya Flood Response Situation Report.3 Oct.2023

⁵ Libya National Center of Disease Control (NCDC), Report.16 on epidemiological situation at flooded affected eastern municipalities in Libya.2 Oct.23

children now living with extended families; UNICEF is collaborating with Social Affairs (MOSA) and the Social Solidarity Fund (SSF) to improve mechanisms of identification, registration and support for UASC. The altered environment and the loss of familiar surroundings necessitate immediate child protection measures to ensure children's well-being, rights, and safety in such challenging times. Women and girls are also among the most vulnerable; displacement, temporary shelter conditions, and scarcity of essential services can increase psychosocial stress and exacerbate domestic and other forms of Gender-Based Violence (GBV) risks.

Education: Storm Daniel severely disrupted education in eastern Libya, affecting 15 municipalities. According to the Education authorities, out of the 117 impacted schools and facilities across 15 municipalities, 44 suffered significant damage, and four were destroyed. Several schools are now sheltering IDPs, posing immediate and potential long-term disruptions to children's education. MoE is prioritising the reopening of schools to ensure uninterrupted learning and address potential learning gaps. MoE is also developing alternative plans for students from destroyed schools to ensure continued access to learning opportunities.

High displacement rates may lead to overcrowded classrooms, hindering child-centred learning and conducive quality learning. Educators are pressured to provide psychosocial support to students when they need support. Swiftly reopening schools and providing educators with necessary tools and support are essential steps to support children, especially girls, and their families, primarily since schools can act as points of entry for other essential services.

UNICEF RESPONSE

Coordination:

The Child Protection Sub-Working Group, consisting of 25 actors and led by UNICEF, was activated to oversee inter-agency child protection interventions, strengthen the NGO/government co-leadership and assist partners in UASC registration. Work is currently focused on harmonising the reporting mechanisms and ensuring that child protection interventions are being captured in relevant documents and dashboards.

UNICEF is leading the WASH Thematic Working Group involving over 15 partners, including the General Company of Water and Wastewater (GWWC), the General Desalination Company (GDC), and a representative from the Ministry of Local Government (MoLG). The Agency for Technical Cooperation and Development (ACTED) and the International Federation of the Red Cross and Red Crescent Societies (IFRC) offered to be the Co-Leads of the working group along with UNICEF. The working group is focused on increasing effective coordination, avoiding duplication of humanitarian assistance, and strengthening the WASH response in most affected areas.

Since the onset of the crisis, the Education authorities have requested UNICEF's participation and presence in its Emergency Response Committee. Additionally, UNICEF assumed responsibility for sector coordination in partnership with the Norwegian Refugee Council (NRC) through the Rapid Response Mechanism (RRM) Education Thematic Working Group. UNICEF and NRC are leading the sector through weekly meetings to ensure a harmonised response and to minimise duplication of efforts from humanitarian partners.

UNICEF is co-leading the nutrition thematic group with MoH and actively participating in the health thematic group led by MoH and WHO.

Health and Nutrition

UNICEF took swift action to coordinate with health authorities and partners, deploying three mobile health teams to IDP shelters in Derna, Albayda, Shahat, and Benghazi. Teams are deployed by the Primary Health Care Institute (PHCI) with the support of UNICEF, providing crucial support, including Mental Health Psychosocial Support services to 61 (19 male and 42 females) clients, conducting health and nutritional screening, micronutrient

supplementation, and Infant and Young Child Feeding Counselling (IYCF) for 83 children and 45 Pregnant and Lactating Women (PLW). Additionally, Micronutrient supplements were distributed to 12 health facilities, covering the needs of 330 children and 1100 PLW.

To enhance preparedness for public health emergencies, in collaboration with NCDC, UNICEF prepositioned emergency supplies, including Acute Watery Diarrhoea (AWD) Kits and Malaria kits. Since the crisis began, UNICEF dispatched essential medical supplies to meet the health needs of 91,750 people for three months in 17 health facilities across the affected regions (including 14 Primary Health Care facilities and 3 Secondary Health Care facilities). Support has also been extended to the Ministry of Health's (MoH) Primary Health Care Institute (PHCI), providing vital equipment to support maternal and child health services (MCH). The health repercussions from damaged infrastructure, depleted supplies, and healthcare worker shortages highlight the urgency of addressing healthcare challenges, especially for vulnerable populations, including children. Strengthening primary healthcare systems, including through needed investments, will be vital. UNICEF conducts frequent health facility assessments, collaborating with MoH, partners, and donors to ensure the availability of quality health services. UNICEF has also developed and submitted a plan for the recovery of Primary Health Care Centers to the authorities.

WASH:

UNICEF provided water treatment materials that could cover 250,000⁶ people and distributed 7,655 individual hygiene kits, including menstrual hygiene products, and safe water practice messaging and hygiene promotion campaigns. UNICEF collaborated with NCDC to provide 32,000 water purification tablets to Derna. An additional 17,000 water purification tablets and 56 drums of chlorine for reservoir disinfection (1,400 kg of chlorine powder) have been supplied to GCWW, ensuring reservoir disinfection and enabling ongoing clean water access through the public network.

UNICEF facilitated the installation of 10 safely accessible water tanks (2,000-litre capacity) at IDP sites, directly benefiting 960 individuals. UNICEF supported GCWW with chlorination products for households and vital water pipes to reinstate the water connection at Derna's desalination plant. To support local capacity on water-safety testing, UNICEF trained 13 technicians from storm-affected areas on water quality testing and monitoring, and this initiative can assist in ensuring water quality supplied to affected populations and mitigate waterborne health risks.

Social and Behavioural Change

In a collaborative effort between UNICEF and NCDC, the "Safe Water: Healthy Lives" awareness campaign was launched on 29 September. Primarily targeting communities in Derna, Albayda, and Soussa, the campaign's primary aim is to advocate for preventive measures against waterborne diseases, underscore the importance of hygiene practices, including menstrual health and hygiene, and prioritise the safety and well-being of unaccompanied children. The campaign reached 188,446 individuals through mass media so far; 11,996 individuals were connected through direct interactions, while 176,450 individuals were reached via expansive mass media channels.

Various activities propelled the campaign's success. Eighty frontline first responders, including scouts, Red Crescent, and army members, were given Risk Communication and Community Engagement (RCCE) training by UNICEF, increasing their capacities for better community communication and engagement. In an effective use of religious spaces, 90 mosques disseminated key messages during Friday prayers, targeting approximately 3,000 worshipers with pertinent topics like waterborne disease prevention. The campaign also extended its reach to the

⁶ This number includes 250,000 individual who have indirectly benefited from the chlorination material provided to the whole district of the green mountain, the number also includes the 30,000 individuals benefiting from the boreholes repairs

streets, organising 26 awareness sessions that particularly benefited migrant labourers and academic institutions, holding sessions across schools and at Omar Al-Mukhtar University. Public spaces, healthcare institutions, and local businesses like shops and malls were also integrated into the campaign. One notable initiative was the establishment of awareness tents at strategic locations in Derna, fostering one-on-one sessions with 2,000 individuals. Complementing these direct engagements, 1,500 awareness posters and 1,850 booklets were distributed across pivotal locations, such as petrol stations, educational establishments, and religious sites. Lastly, the power of mass media was harnessed by collaborating with nine radio stations, effectively transmitting the campaign's messages to a large audience.

Child Protection

UNICEF Libya's Child Protection Programme expanded its mental health and psychosocial support (MHPSS) interventions to prioritise children's emotional well-being and psychological recovery during the crisis. These tailored MHPSS interventions aim to help girls and boys cope with trauma and stress, ensuring their overall well-being and development.

During the reporting period, 531 children (258 girls) received MHPSS support, including Psychological First Aid (PFA). This number is expected to grow as additional mobile response teams are deployed in affected areas following needs assessments and access approvals from relevant authorities. Moreover, 121 people (51 female and 70 male), including caregivers, received MHPSS training, equipping them with skills to care for themselves and support their children. Parental involvement is crucial for children's recovery and resilience, fostering a supportive family environment vital for healing. Frontline workers, including 62 individuals (45 per cent women, 55 per cent men) from MoE, the Ministry of Social Affairs (MoSA), and the Scouts, have been trained by UNICEF in essential MHPSS interventions and safe identification and referral processes. This training ensures the sustainability of mental health support at the community level, enabling a more coordinated and effective response.

Collaborative efforts with MoSA and the Social Solidarity Fund (SSF) are underway to establish an information management system that tracks UASC. This system ensures that identified UASCs receive personalised support. Additionally, 3,600 individuals, including 1,980 girls and 1,620 boys, have received support through Early Childhood Development (ECD) and recreational kits. These kits play a vital role in promoting children's holistic development and well-being, aiding them in regaining a sense of normalcy and building resilience after a disaster.

Education

UNICEF Libya's Education Programme framed its response to the crisis around supporting children, especially girls, to access education in safe learning environments, minimising the disruption to education, and providing professional and well-being support for teachers and educational staff.

UNICEF initiated a rapid mapping of damage to flood-affected schools, which was completed this week. Based on the results, schools were prioritised for immediate support to reopen based on the severity of damage and level of accessibility and safety. 14 schools have been identified for the first phase of cleaning and provision of classroom furniture to facilitate their reopening and get 6,400 children back to learning. The expansion of this intervention to reach additional schools, including light rehabilitation of classrooms and WASH facilities, is being coordinated with the MoE. In parallel, 200 school-in-a-box kits were provided to MoE for distribution in Derna. Each kit caters to 40 students and will swiftly re-establish learning environments for up to 8,000 students when schools reopen. In addition, UNICEF will assist IDP children in the affected areas to return to school by providing school bags and individual learning materials.

Beyond access support, UNICEF's response includes providing life skills resources for children and youth and teacher training on child-centred pedagogies and classroom management; 200 teachers are estimated to be targeted with capacity building on child-centred learning, classroom management, and MHPSS. Additional support

to teachers is planned through providing psychosocial support in the medium term on their return to school. As part of its longer-term response, UNICEF is establishing the Learning Passport in Libya, an online platform tailored to meet the educational needs of Libyan children and ensure continuous access to education. UNICEF is working with a committee of Inspectors and Curriculum Specialists from MoE to populate the platform with suitable content and, in tandem, is preparing a sign-up campaign for the affected areas.

Communication and media engagement:

UNICEF is working to raise awareness of the Libya flood crisis through its social media accounts to highlight the plot of the crisis, UNICEF's response on the ground and the resources needed. UNICEF published a <u>press release</u> on 28 September to shed light on the 16,000 displaced children in eastern Libya following Africa's deadliest storm in recorded history and in an appeal for funds to support long-term recovery efforts focused on education, health, and water. The press release was issued upon the conclusion of the <u>Derna field visit</u> of the UNICEF MENA Regional Director, where UNICEF spoke about the devastating impact of the floods on children and families.

UNICEF continues to engage with the media, providing regular updates on the humanitarian situation in flood-affected areas of Libya and UNICEF's response, including the early recovery. These included <u>Aljazeera Live, Alghad TV, Alhurra, Alqahira News (Cairo News)</u>, <u>Alwasat TV, Almash'had TV and Libya Alahrar.</u>

Funding Status:

As the damage caused by Storm Daniel becomes more evident, more significant needs relating to the destruction of essential health, water, education, and child protection infrastructure are expected to emerge. UNICEF's initial response required **US\$6.5 million** to reach children with emergency services and supplies. UNICEF has now developed a revised appeal encompassing humanitarian and recovery responses for **USD\$26.5 million**. UNICEF raised **US\$5.4 million**, including US\$1.6 million in institutional funding. UNICEF would like to thank the Central Emergency Response Fund and its National Committees for their generous support.

SECTOR	TARGET	APPEAL		RECEIVED		GAP - US\$		GAP - %
WASH	250,000 people including 75,000 children	\$	9,000,000	\$	3,834,000	\$	5,166,000	57%
Health and Nutrition	250,000 people including 75,000 children	\$	7,500,000	\$	1,121,000	\$	6,379,000	85%
Child Protection	75,000 children	\$	3,000,000	\$	825,000	\$	2,175,000	73%
Education	75,000 children	\$	3,000,000	\$	682,000	\$	2,318,000	77%
Social Protection	45,000 including 13,500 children	\$	3,500,000	\$	ı	\$	3,500,000	100%
Cross- sectoral: PSEA, AAP, SBC, Evaluation and RRM	250,000 people, including 100,000 children	\$	500,000	\$	-	\$	500,000	100%
TOTAL		\$	26,500,000	\$	6,462,000	\$	20,038,000	76%